	DATENT	BD	Application or Docket Number										
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10720896					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
TO	OTAL CLAIMS		36				ſ	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			JL minus 20=		•	16		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		4			X43=		OR	X86=		
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	1	OR	+290=		
* If	the difference	e in column 1 is	ero, enter	"0 " in c	column 2	. L	TOTAL	 	OR	TOTAL			
CLAIMS AS AMENDED - PART II									<u></u>	J	OTHER		
_5	/24/0V	(Column 1)		(Column 2) (Column 3				SMALL	ENTITY	OR	SMALL		
AMENDMENT A	'	CLAIMS REMAINING AFTER AMENDMENT		NUME PREVICE PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	. 36	Minus	** 3	7	= ()		X\$ 9=	6	OR	X\$18=		
AME	Independent	* '	Minus	see ;	3	= ()		X43=	0	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
							L	TOTAL	E/ 1	OR	TOTAL ADDIT, FEE		
(2/14/05 (Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 16	Minus	- 30	<u>/</u>	= ().		X\$ 9=	0	ÖR	X\$18=		
AME	Independent	<u></u>		CLAIM	= (X43=	0	OR	X86=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
								TOTAL DDIT. FEE	0	OR	YOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE • NUMB PREVIO • PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
AME.	Independent	*	Minus ***			=	}	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=					
• #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	,	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ODIT. FEE COUNTY IN THIS SPACE IS LESS THAN 3, enter "3."										OR ,	TOTAL ADDIT. FEE		
1	The "Highest Num	ber Previously Paid	For" (Total or	Independe	nt) is the	highest number	r foun	d in the ap	propriate box	in colu	ımn 1.		